

**Commonwealth of Massachusetts
Department of Mental Health
Trauma Assessment for DMH Facilities/Vendors**

This form is a guide to gathering information with clients about a possible trauma history. It is recommended for use as part of the intake assessment for all DMH clients in all settings (inpatient, outpatient, emergency/crisis, day treatment, etc.). It should be used in conjunction with the De-escalation Form. After clinical review, information obtained should be incorporated into the client's treatment plan.

1. Do you have a history of physical abuse (e.g., hit , punched, slapped, kicked, strangled, burned, threatened with object or weapon, etc.)? Yes___ No___ Don't Know ___

If yes, in childhood? ___ adolescence? ___ adulthood? ___ at present? ___

By whom? stranger ___ acquaintance ___ partner/spouse ___ parents ___

other family member ___ ritual abuse ___

2. Do you have a history of sexual abuse (e.g., unwanted kissing, hugging, touching, nudity, attempted or completed intercourse)? Yes___ No___ Don't Know ___

If yes, in childhood? ___ adolescence? ___ adulthood? ___ at present? ___

By whom? stranger ___ acquaintance ___ partner/spouse ___ parents ___

other family member ___

3. Have you ever been raped? Yes___ No___ Don't Know ___

If yes, in childhood? ___ adolescence? ___ adulthood? ___ recently? ___

By whom? stranger ___ acquaintance ___ partner/spouse ___ parents ___

other family member ___ ritual abuse ___

4. Have you experienced an acute trauma such as a natural disaster, severe accident or threat to life, witnessing a death or violence to someone else, or been a victim of a crime?

Yes___ No ___ Don't Know ___

If yes, at what age and circumstances? _____

5. If yes to any of the above, are you experiencing flashbacks, nightmares, insomnia, numbness, confusion, memory loss, self injury, extreme fearfulness or terror, etc., related to the trauma? Yes ___ No___

If yes describe _____

**Please incorporate the information obtained in the trauma assessment
into the treatment plan for this client.**